AMENDMENT TRANSMITTAL LETTER						Docket No. N0484.70060US00	
Application No.		Filing Date E		Examiner		Art Unit	
10/550,967-Conf. #6112		September 26, 2005		Jesse S. Pull	S. Pullias 2626		
pplicant(s): Hei	nrich F. Bartosi	k et al.					
				ORRECTION, COF	RECTION	DEVICE	
	TC	THE COMMI	SSIONER FO	OR PATENTS			
Transmitted here	with is an ame	ndment in the	above-identif	ed application.			
The fee has beer	n calculated an	d is transmitte	d as shown b	elow.			
			S AS AMEN	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	17	- 20 =	0	x 52.00		0.00	
Independent Claims	3	- 3 =	0	x 220.00		0.00	
Multiple Depend	dent Claims (ch	eck if applicabl	le)				
Other fee (pleas	e specify):						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						0.00	
				Small Entity			
x Large Entity							
x Large Entity		d for this ame	ndment.				
x No additions	al fee is require			the amount of \$			
X No additional	al fee is require ge Deposit Acc	ount No	i	n the amount of \$		·	
X No additiona Please char A check in the	al fee is require ge Deposit Acc he amount of \$	count No	io cover	n the amount of \$ _			
X No additional Please char A check in the Payment by	al fee is require ge Deposit Acc he amount of \$ credit card. Fo	ount No	to cover	the filing fee is end	losed.		
X No additional Please chart A check in the payment by X The Director	al fee is require ge Deposit Acc he amount of \$ credit card. Fo	orm PTO-2038	to cover is attached. ge and credit	the filing fee is end	losed.	/2825	
X No additiona Please char A check in ti Payment by X The Director as described	al fee is require ge Deposit Acc he amount of \$ credit card. For	orm PTO-2038	to cover is attached. ge and credit	the filing fee is end	losed.		
X No additiona Please char A check in ti Payment by X The Director as described X Credit a	al fee is require ge Deposit Acc he amount of \$ credit card. For r is hereby autr d below. A-dup any overpaymen	orm PTO-2038 porized to char	to cover to cover s is attached. ge and credit	the filing fee is end	losed.	/2825	
X No additiona Please char A check in ti Payment by X The Director as described X Credit a	al fee is require ge Deposit Acc he amount of \$ credit card. For r is hereby autr d below. A-dup any overpaymen	orm PTO-2038 porized to char	to cover to cover s is attached. ge and credit	the filing fee is end Deposit Account Nenclosed:	losed. lo. 23	/2825 16 and 1.17.	
X No additiona Please char A check in ti Payment by X The Director as described X Credit a	al fee is require ge Deposit Acc he amount of \$ credit card. For r is hereby auth d below. A dup iny overpaymer any additional fil	porm PTO-2038 pormed to char pricate copy of nt. pricate or application	to cover to cover s is attached. ge and credit	the filing fee is end Deposit Account N	losed. lo. 23	/2825 16 and 1.17.	

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being standard or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.5(a)(4).

Dated: 4-13-09

Signature: WANLIL Laldw